

Work Order ID 50968

July 28, 2009 11:48:04 AM



Page 1

Item ID: D3011-1

Revision ID: B

Item Name: Rappel

Start Date: 31/07/2009 Start Qty: 10.00

Required Date: 05/08/2009 Req'd Qty: 10.00

Reference: *09.07.28*

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____



Setup Start



Stop



Cust Item ID:

Customer:

Run Start



Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Draw Number	Draw Rev.	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	----------------	--------------	--------------	---------------	---------------	------------------	----------------

Draw Nbr	Revision Nbr
D3011	Rev B

100
 BAND SAW
 Bandsaw
 Jeaspa Bandsaw
 Memo
 Cut Blanks: 26.625"

0.00

0.00

10

M.A 09/07/28



110
 HAAS CNC VERTICAL MACHINING #1
 HAAS 1
 HAAS CNC vertical machine #1
 Memo

0.00

0.00

Machine as per folio FA129
 Folio Rev: *B*
 Dwg Rev: *B*

M.A 09/08/01
88 09/08/04

5

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Accept



Setup Start



Stop



Cust Item ID:

Customer:

Run Start



Stop



Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Draw Number	Draw Rev.	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	QC2- Inspect parts off machine FAI/FAIB	0.00							
QC	Memo	0.00							
Quality Control			LA	09/08/01					
130	QC8- Inspect parts - second check	0.00							
QC	Memo	0.00							
Quality Control									
131		0.00							
Outsource2	Memo	0.00							
Outsource process - NDT	LPI AS PER ASTM 1417 LEVEL 2 AS PER DWG d3011		P/O: 10194						

rec'd + attached report

CL 09/08/11 (10)

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Item ID: D3011-1

Accept



Setup Start



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Stop



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Cust Item ID:

Required Date: 05/08/2009 Req'd Qty: 10.00

Customer:

Reference:

Run Start



Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Stop



QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Draw
Number Draw
Rev. Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

132

QC5- Inspect part completeness to step on W/O

0.00



QC

Memo

0.00

Quality Control

ml 09 08 11

140

Chemical Conversion Coat per QSI005 4.1

0.00



HandFinish

Memo

0.00

Hand Finishing

09-08-12 5

150

White Gloss(Ref:4.3.5.1) per QSI005 4.3-Alum

0.00



Powdercoat

Memo

0.00

Powder Coating

START TIME: 2:30pm
OVEN TEMPERATURE: 320°C
FINISH TIME: 3:00pm

09-08-12

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Reference:

Accept



Setup Start



Stop



Cust Item ID:

Customer:

Run Start



Stop



Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run HoursDraw
NumberDraw
Rev.Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

160



QC

Quality Control

QC3- Inspect Part Finish

0.00

27 S 09/08/13

0.00

⑤

d

Memo

170



Packaging

Packaging

Identify as per dwg & Stock Location: 6-A

0.00

0.00

Memo

EP 09/08/13 ⑤

180



QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

0.00

Memo

09/08/17

ME 09-08-14

C2 09/08/13



LIQUID PENETRANT TEST REPORT

P- 14945

CLIENT	DART AEROSPACE	DATE	Aug-10-2009	PAGE	1	OF	
ATTENTION	LINDA CHANTAL	ACUREN JOB NO.	188-09-001484	TIME	AM	<input checked="" type="checkbox"/>	PM
ADDRESS	1270 ABERDEEN ST. HAWKESBURY ON. K6H-1K7	POWOW NO.	10194	WORK LOCATION	HAWKESBURY		
PROJECT	F.P.I. ON MACHINED PARTS - AND CROSS TUBES			ACCEPTANCE STD.	ASIM 1417	REV./DATE	2007
ITEM(S) EXAMINED	44 STUDS. 20 RAPPES 7 CROSS TUBES. + 12 STUDS.						

JOB DESCRIPTION	PROCEDURE NO. LT-0002	REV./DATE		TECHNIQUE NO. LT-TECH 2	REV./DATE		
PART NO.				MATERIAL	STAINLESS STEEL	THICKNESS	1/4" WELDED
SCOPE	WET FLOUORESCENT LIQUID PENETRANT INSPECTION CARRIED OUT 100% EXTERNAL						

TEST DETAILS	
METHOD	<input checked="" type="checkbox"/> FLUORESCENT <input type="checkbox"/> VISIBLE
FAMILY BRAND	MAGNAFLUX
PENETRANT	2L 67 MINIMUM DWELL TIME 45 MIN.
PENETRANT REMOVER	H2O MINIMUM DRY TIME >10 MIN.
DEVELOPER	SKD 52 MINIMUM DWELL TIME 10 MIN.
DEVELOPER TYPE	<input checked="" type="checkbox"/> NON AQUEOUS <input type="checkbox"/> AQUEOUS <input type="checkbox"/> DRY
<input checked="" type="checkbox"/> WATER WASH <input type="checkbox"/> SOLVENT REMOVABLE <input type="checkbox"/> POST EMULSIFIED	
BLACK LIGHT S/N 16459 OUTPUT > 1000 μ W/cm ² <input type="checkbox"/> AMBIENT < 2 fc	
LIGHTING EQUIP. <input type="checkbox"/> FLASHLIGHT <input type="checkbox"/> TROUBLELIGHT <input type="checkbox"/> OUTPUT > 100 fc @ SURFACE	
OTHER LABINO	
LIGHT METER S/N	
CAL DUE DATE DEC 8 - 2009	

TEST SURFACE	
SURFACE CONDITION	<input type="checkbox"/> AS GROUND <input type="checkbox"/> AS WELDED <input type="checkbox"/> MACHINED <input type="checkbox"/> SHOT BLASTED <input type="checkbox"/> CLEAN BARE METAL
SURFACE TEMPERATURE	<input type="checkbox"/> < -4°C/ 20°F <input type="checkbox"/> -4°C/ 20°F TO 10°C/ 50°F <input type="checkbox"/> 10°C/ 50°F TO 52°C/ 125°F <input type="checkbox"/> > 52°C/ 125°F

RESULTS-	(<input type="checkbox"/> METRIC <input type="checkbox"/> IMPERIAL)
14 Pcs STUDS - W.O. 509 33 ✓	
30 Pcs STUDS - W.O. 507 21 ✓	
12 Pcs STUDS - W.O. 509 32 ✓	
10 Pcs RAPPET - W.O. 509 67 ✓	
10 Pcs RAPPET - W.O. 509 68 ✓	
1 CROSS TUBE - W.O. 510 83 ✓	
1 CROSS TUBE - W.O. 510 84 ✓	
1 CROSS TUBE - W.O. 510 85 ✓	
1 CROSS TUBE - W.O. 508 73 ✓	
1 CROSS TUBE - W.O. 508 27 ✓	
1 CROSS TUBE - W.O. 508 00 ✓	
1 CROSS TUBE - W.O. 508 26 ✓	
ml 09 08 11	
TO BUFF AND EXAMINE - INDICATION	
TO BUFF AND EXAMINE - INDICATIONS	
- 6 ITEMS TO EXAMINE AFTER BUFFING	
- OTHER Pcs FOUND ACCEPTABLE TO STANDARD.	

Scope of Services
The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a result of the data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.

Standard of Care
In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

SIGNATURES	
CLIENT REPRESENTATIVE	CHANTAL LAUDIE
TECHNICIAN (SIGNATURE)	Mike Johnston
NAME (PRINT)	Mike Johnston
CGSB LEVEL	1 st SNT LEVEL
CGSB REG. No	6066
CGSB LEVEL	2 nd SNT LEVEL
CGSB REG. No	
DTR #	E-20068
REPORT REVIEWED BY:	
NAME	INITIALS